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Bib Data Sheet

CONFIRMATION NO. 9252

|   |   |                                    |   |   |
|---|---|------------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/021,556  | <b>FILING DATE</b><br>12/19/2001<br><b>RULE</b>   | <b>CLASS</b><br><del>362</del> 315 | <b>GROUP ART UNIT</b><br>28 <del>5</del><br>28  | <b>ATTORNEY DOCKET NO.</b><br>05733-010-US-03 |
| <b>APPLICANTS</b><br>Daniel Chevalier, Boisbriand, CANADA;<br>Alain Martel, Sainte-Adele, CANADA;   |   |                                    |   |   |
| <b>** CONTINUING DATA *****</b> NONE<br>hp  |   |                                    |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>CANADA 2,329,305 12/20/2000<br>CANADA 2,336,497 02/14/2001<br>hp  |   |                                    |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br>** 01/30/2002   |   |                                    |   |   |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <i>Wanda Chibj</i> hp<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CANADA  | <b>SHEETS DRAWING</b><br>18   | <b>TOTAL CLAIMS</b><br>127                    |
|   |   |                                    |   | <b>INDEPENDENT CLAIMS</b><br>2                |
| <b>ADDRESS</b><br>AIR MAIL<br>BROUILLETTE KOSIE<br>25th Floor<br>1100 Rene-Levesque Blvd. West<br>Montreal, QC H3B 5C9<br>CANADA  |   |                                    |   |   |
| <b>TITLE</b><br>Lighting device   |   |                                    |   |   |
| <b>FILING FEE RECEIVED</b><br>1206  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |